1 of 2

CLAIMS ONLY			Application Number 09/696827	Filing Date
			Applicant(s)	

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				Indep.	Depend.	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend								
1	1						51			1				
2		1					52							
3		1					53			1				
4							54			1				
5		1					55							
6							56			1				
7		1					57							
8							58							
9							59							
10							60			1				
11		1					61	1						
12							62							
13							63			1				
14		1					64			1				
15							65							
16		1					66							
17		1					67							
18		1					68							
19							69			1				
20		1					70							
21							71			1				
22							72			1				
23		1					73							
24							74							
25		1					75							
26							76							
27							77			1				
28							78			1				
29							79							
30							80							
31	1						81			1				
32							82							
33							83	\		1				
34							84							
35							85							
36							86	1						
37							87			1				
38							88							
39							89							
40							90							
41							91			1				
42							92							
43							93							
44							94							
45							95	1		1				
46		1					96							
47							97							
48							98							
49							99			1				
50		1					100			1				
Total Indep	2						Total Indep	3						
Total Depend	48						Total Depend	47						
Total Claims	50						Total Claims	50						

50
100
2
102

202?

CLAIMS ONLY

Application Number	Filing Date
09/696827	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			Indep.	Depend.	Indep.	Depend.	Indep.	Depend.
	Indep	Depend	Indep	Depend	Indep	Depend							
1		1					51						
2		1					52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	0						Total Indep						
Total Depend	2						Total Depend						
Total Claims	2						Total Claims						